ARIZONA DE Vital Re	STATE OF ARIZONA EPARTMENT OF HEALTH SERVICES COORDS and Information Services MENT TO VITAL RECORD	STATE FILE NO. 23-000130
AME OF A. FIRST B. M Egistrant	IIDDLE C. LAST	DATE OF MONTH DAY YEAR X B
RAMON	GUTIERREZ	2. APRIL 6, 1923
ACE OF A. INSTITUTION OR STREET ADDRESS	B. TOWN OR CITY MIAMI	GILA ARIZ
A, ITEM NO. AND IDENTIFICATION	B. ITEM APPEARS BEFORE AMENDME	NT C. ITEM APPEARS AFTER AMENDM
2. FULL NAME OF CHILD	JESUS GUTIEREZ	RAMON GUTIERREZ
8. FATHER'S FULL NAME	MIGUEL GUTIEREZ	MIGUEL GUTIERREZ
3 14. FULL MAIDEN NAME OF MOTH	ER PIADAD CASSILLAS	PIEDAD CASILLAS
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	TRACT OF DOCUMENTARY EVIDENCE	
SUPPORTS THE FOLLOWING CLAIMS: BY		ANNA DATE ESTABLISHED O LE 17
	PORTS CLATMS IN COLUMN C.	
	CERTIFICATE, OUR LADY OF TH	E DATE ESTABLISHED 5-13-23
2. BLES	SSED SACRAMENT	
SUP	PORTS CLAIMS IN COLUMN C.	
SUPPORTS THE FOLLOWING CLAIMS:		DATE ESTABLISHED
3.		ŧ
UPPLEMENTARY ENTRIES		
The vital record identified above has been amended a evidence has been reviewed which substantiates the	ccording to the laws of this state and regulations o e changes set forth.	_
9-27-79 9 S79-907	10 A. Medred B.	Rambo 10 B. REGISTRAR